

Multiple Dependent Claim  
Fee Calculation Sheet

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-876)

10/031759  
APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3				1		
4				1		
5				1		
6				1		
7				1		
8		3		3		
9		3		3		
10		3		2		
11				1		
12				1		
13				1		
14				1		
15						
16				1		
17				1		
18		3		3		
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31				1		
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33				1		
34				1		
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36				1		
37				1		
38		6		6		
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50						
T TAL IND.	1		1			
T TAL DEP.	17		25			
T TAL CLAIMS	18		26			

	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL CLAIMS						